POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b).									
I hereby appoint:									
Practitioners associated with the Customer Number			r:	20350					
OR									
Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):									
	Name			Registration Number N		lame		egistration Number	
· •									
					<u> </u>				
									
as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b). I further authorize any of the above-identified practitioners to execute a Statement Under 37 CFR 3.73(b) on the undersigned's behalf to certify the chain of title and establish the undersigned's ownership in any and all patent applications in which rights have been assigned to the undersigned.									
Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to:									
20070									
The address associated with Customer Number:									
OR Firm or									
	Lul Individual Name								
	Address								
City			Sta	ate			Zip		
Cou	ntry								
Tele	phone				Email		····edi-		
Assignee Name and Address:									
Ancestry.com Operations Inc. 360 West 4800 North									
Provo, UT 84604									
A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be									
filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of									
the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.									
SIGNATURE of Assignee of Record									
The individual whose signature and title is supplied below is authorized to act on behalf of the assignee									
Signatu	re Z	347	THE REAL PROPERTY OF THE PROPE	· · · · · · · · · · · · · · · · · · ·	na alabihata a anga a a kaca	Date	7/24/04	î ———	
Name	Name David Farnsworth Telephone 801705-					944			
Title	Vice Preside	/ice President of Legal Services							